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## BIB DATA SHEET

CONFIRMATION NO. 5135

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/607,631	06/27/2003 RULE	435	1645	08411-035001		
<b>APPLICANTS</b> F. Chris Minion, Ames, IA; Steven P. Djordjevic, Ema Heights, AUSTRALIA; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/392,632 06/28/2002 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 10/14/2003						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/PADMA BASKAR/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> IA	<b>SHEETS DRAWINGS</b> 23	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> FISH & RICHARDSON P.C. PO BOX 1022 MINNEAPOLIS, MN 55440-1022 UNITED STATES						
<b>TITLE</b> Immunogenic Mycoplasma hyopneumoniae polypeptides						
<b>FILING FEE RECEIVED</b> 1006	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			